

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>12/26/06</u>		2 Serial/Patent # <u>10/766,647</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input type="checkbox"/>	Extension of Time		\$
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input checked="" type="checkbox"/>	Petition	<u>07/05/06</u>	\$ 130.00
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input type="checkbox"/>	Maintenance		\$
<input type="checkbox"/>	Assignment		\$
<input type="checkbox"/>	Other		\$
		7 TOTAL AMOUNT OF REFUND	<u>\$ 130.00</u>
		8 TO BE REFUNDED BY:	
<input type="checkbox"/>	Treasury Check		
<input checked="" type="checkbox"/>	Credit Deposit A/C #: <u>9 1 9 -- 5 1 1 7</u>		
10 REASON:			
<input type="checkbox"/>	Overpayment		
<input type="checkbox"/>	Duplicate Payment		
<input checked="" type="checkbox"/>	No Fee Due (Explanation): free petition		
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Brian Hearn</u>		TITLE: _____	
SIGNATURE: <u>/s/ BH</u>		PHONE: _____	
OFFICE: Petitions			
***** THIS SPACE RESERVED FOR FINANCIAL USE ONLY *****			
APPROVED: <u>CKH</u>		DATE: <u>12/27/06</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B